

SANTA ROSA COUNTY POLL WORKER APPLICATION

Name_____ Phone_____

Address_____ Apt/Lot_____

City_____ Pct._____ Party Affiliation_____

SSN_____

1. Are you a retiree from any Florida State-administered retirement system?_____

2. Do you have transportation?_____

3. If your spouse is a Poll Worker, must you work at the same precinct due to transportation?_____

4. Are you willing to work out of your precinct at a nearby location?_____

5. Are you willing to serve as an alternate (attend training class and be on standby for a work assignment as openings occur)?_____

6. Do you have any physical disabilities that would prevent you from performing the required duties?_____

7. Have you ever been a Poll Worker?_____ If yes, where?_____

8. Were you referred by a Santa Rosa County Poll Worker?_____ if yes, Name _____
other?_____

Only those physically able to perform required duties on election day will be selected to serve. You must be able to lift approximately 40 lbs., be able to assemble voting booths, be able to read and write, have good eyesight and hearing, be able to endure the long election work day (6:00 AM until approximately 7:30 PM, minimum), and be able to deal courteously and patiently with the public and co-workers. If you are selected to work, you will be notified by mail. For those selected, training classes will be conducted, as required by law, and you will receive payment for attending.

I DECLARE THAT I AM PHYSICALLY ABLE TO PERFORM THE DUTIES OF ANY ASSIGNED POSITION AND THAT I WILL ATTEND ALL REQUIRED TRAINING CLASSES.

Signature_____ Date_____

For Office Use Only

Interviewer_____